



# Lobbying Registration Form

Lobbyist's Registration Number

2. Name:

N/A

Address:

Business or purpose:

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

3. Name:

N/A

Address:

Business or purpose:

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

4. Name:

N/A

Address:

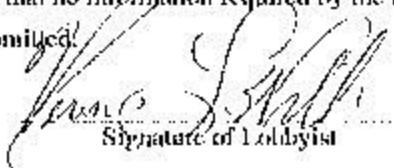
Business or purpose:

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

  
Signature of Lobbyist

ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE  
FOR  
INITIAL  
REGISTRATION  
ONLY